#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000074686

Entity Name: FST CAPITAL, LLC

Feb 25, 2024 Secretary of State 6406131793CC

**FILED** 

### **Current Principal Place of Business:**

3600 MYSTIC POINTE DR

**APT 808** 

AVENTURA, FL 33180

# **Current Mailing Address:**

3600 MYSTIC POINTE DR APT 808

AVENTURA, FL 33180 US

FEI Number: 82-1349120 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SHMUELI, OREN 3600 MYSTIC POINTE DR APT 808 AVENTURA, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHMUELI OREN 02/25/2024

Electronic Signature of Registered Agent Date

# Authorized Person(s) Detail:

Title MANAGER Title AUTHORIZED MEMBER

Name SHMUELI, OREN Name ASSIS, MICHAEL J

Address 3600 MYSTIC POINTE DR
APT 808 City-State-Zip: PLANTATION FL 33324

City-State-Zip: AVENTURA FL 33180

Title AUTHORIZED MEMBER
Name SHMUELI, FLORANCE
Address 3600 MYSTIC POINTE DR

Title AUTHORIZED MEMBER
Name RIGHT SHARK LLC
Address 2300 PRAIRIE AVE

APT 808 City-State-Zip: MIAMI BEACH FL 33140

City-State-Zip: AVENTURA FL 33180

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHMUELI OREN MANAGER 02/25/2024